



**TESTIMONY OF**

**DAVID L. WASHINGTON, Master Sergeant, USAF (RET)**  
**National President**

**OF**

**THE RETIRED ENLISTED ASSOCIATION**

**Before The**

**SENATE VETERANS AFFAIRS COMMITTEE**

**AND**

**HOUSE VETERANS AFFAIRS COMMITTEE**

**On**

**MARCH 13, 2003**

## **BIOGRAPHY OF DAVID L. WASHINGTON**

David L. Washington, the National President of The Retired Enlisted Association, is a retired Master Sergeant of the United States Air Force. He served 26 years as a Security Police Supervisor all over the world including Germany, North Africa and the Philippines. Before becoming TREA'S President he served as 1<sup>st</sup> Vice President, as a member of TREA'S National Board of Directors and as Chairs of several National Committees. In Aurora Colorado he served in numerous offices for TREA'S Chapter 3. Presently he volunteers for charities helping seniors, the homeless and abused women in Colorado as well as helping at the Rocky Mountains Lions Eye Institute at the University of Colorado Medical School. Mr. Washington received his B.S. Degree in Business Management with a Minor in Police Science from Columbia College. He has been married for 44 years to his wife, Mary. They have 7 children and 6 grandchildren.

## **DISCLOSURE OF FEDERAL GRANTS OR CONTRACTS**

The Retired Enlisted Association does not currently receive, has not received during the current fiscal year or either of the two previous years any federal money for grants or contracts. All the Association's activities and services are accomplished completely free of any federal funding.

Mister Chairman Specter, Mr. Chairman Smith and distinguished members of the House and Senate VA Committees, on behalf of the 100,000 members of The Retired Enlisted Association and its auxiliary and the over one million enlisted retirees of the United States Armed Forces it is an honor to appear before this Joint Hearing. We are here to advise you our views and suggestions on issues that may appear before in the 108<sup>th</sup> session of Congress that will affect retirees and members of the Uniform Services, Veterans and their families and their survivors. The Retired Enlisted Association is a VSO whose members are enlisted military retirees, their families and survivors from all the Services. Our members have dedicated their lives serving this Country and we are grateful that the members of your two Committees have remembered their service and their concerns.

## **Veterans' Health Care**

### **Full Funding for VA Health Care**

We are all well aware that demand for VA health is far out stripping the supply at the present time. There are now approximately seven million enrolled veterans in the VA. Last year over five million tried to be medically cared for within the VA. This has placed impossible burdens on the VA health care system. While we well know that the VA's open enrollment policy was suspended in January the mismatch in funding and demand is still massive. Last year alone over 300,000 enrolled veterans waited from 6 months to one year to get a primary or specialty appointment. This is unacceptable. The delays vary dramatically from place to place in the country but it is a nationwide problem. The American Legion has recently released a study finding that the average wait nationwide is 7 months. TREAA is aware that while we speak the Presidential Task Force is working hard on these issues but there is no need for Congress to wait to confront an obvious problem. We firmly believe that if the VA enrolls a veteran into its system it is honor bound to provide a real health care benefit. The only way to do this is to fully and adequately fund the VA health care system. The members of these Committees have always been champions of full funding for the VA. The mismatch between demand and funding has grown too large. Adequate full funding would shorten the waiting lines and thus improve the care given.

### **Medicare Subvention**

TREAA believes that a Veteran who has paid into Social Security and Medicare should be able to select to receive his or her medical care through the VA without losing the

benefits he or she has paid for all his or her working life. Thus as we have for the last several years we urge Congress to allow Medicare Subvention. Secretary Principi has already made the first step towards subvention by proposing a Medicare+Choice Program for those Veterans over 65 years of age who would be placed in the new Category 8. The details of this interesting proposal are not yet complete but we hope it will be successful and lead to complete subvention in the near future.

### **Dual-Eligible Veterans**

For the last two years TREA has been very concerned that proposed plans would require a dual eligible veteran to choose between his or her two earned benefits. A Veteran who has completed a full career in the Uniformed Services has earned a lifetime health plan for him or herself as well as for their spouse. Additionally, any Veteran of the Armed Services who has served honorably is eligible for VA health care services as provided by statute. And this is the way it should remain. While this concern may sound arcane it is a very practical. TREA received a call from a member that demonstrates what a real world worry this can be. A military retiree has a heart condition that is not service connected and a war wound to his leg that he still is being treated for after all these years. His cardiologist is near his home and is paid for by TRICARE. He receives physical therapy at a VA hospital over 100 miles from home. He certainly wants his heart doctor near him; but he does not want to lose the VA expertise that has kept him mobile all these years. This is what forced choice could do. TREA is aware and very grateful for Congress' strong action to stop forced choice from becoming a reality now or in the future. While we are firmly against any form of forced choice TREA is very much in favor of DOD and the VA coordinating their programs to increase efficiencies and save money by avoiding unhelpful duplications.

### **VA and DOD Health Care Cooperation**

Throughout the years the goal of DOD/VA cooperation and coordination is one that everyone agrees is a wonderful idea and no one has agreed how to accomplish. The Presidential Task Force to Improve Health Care Delivery for Our Nation's Veterans' report is expected at the end of this month. It is clear from their public meetings that they have been giving a great deal of thought and effort over finding ways for the two systems to mesh more effectively. We are looking forward to their expert suggestions. We hope and expect that they will emphasize the need to create a seamless transition from the

status of active duty to veteran. TREA strongly believes that the service member should have one medical record from the day he or she enters the service that can be transferred to and read by the VA whenever appropriate. This one change could improve the life of all future veterans as well as improve the practice of Medical personnel in both health care systems. TREA is well aware that this is a much more complicated fix than it at first sounds. Not only must both systems use the same system and names, they must change how they have operated for years. We hope that your Committees can supply the VA Health Care System with both the determination and the money necessary to make this proposal a reality.

## **Veterans' Benefits**

### **Disability Backlog**

For the last several years one of the main problems facing the VA has been the huge backlog for adjudicating VA claims. Claimants have had to wait for years for a decision. Indeed many have died waiting for a decision. TREA is very pleased to note Secretary Principi's push to deal with this problem. By late last year the backlog has gone down to 463,000 from over 600,000 claims. While this shows a wonderful effort and a real step forward 463,000 pending claims is still a huge waiting list. VA needs to continue to hire more talented professionals and to provide them with continuing training and improved Information Technology (IT) if there is hope of reaching the VA'S stated goal of a continuing list of 250,000 claim docket. The VA should be given the resources necessary to reach these goals.

### **Improvements in Montgomery G.I. Bill Benefits**

For over 50 years veterans who have served honorably in the Armed Services have received higher education benefits. The GI Bill after World War II changed America forever. It allowed people who never would have had the opportunity before to go to college to do so. They and their families moved into the enlarged middle class. The Nation grew more productive and thus richer. It was a glorious success. In the more recent past the skyrocketing costs of Higher Education eroded the present value of the Montgomery GI Bill's benefits. For the last several years TREA and many other VSOs

and Military organizations have been advocating improvements in the Montgomery G.I. Bill. We were very happy with the “ Veterans Education and Benefits Expansion Act of 2001”(P.L. 107-103) championed by your Committees. In steps this law raised the payments for the basic MGIB rates up to \$985 per month starting this coming October 1. This is a 46% increase in just three years and is a serious improvement. However, TREA and the 51 other military, retiree, veterans and higher education organizations that make up the Partnership for Veterans Education final goal is to have the MGIB’s benefits cover the costs of a four year Public University’s degree. With the improvements made by Congress in the last three years the MGIB’s benefits will pay for 67% of the present costs of such an education. On average the veteran will have to add \$485 a month for his or her education. And, of course, we fully expect that higher education costs will rise again in the future, again eroding the value of this benefit. Therefore, TREA hopes that in this Session of Congress you will be able to attach the MGIB’S benefits to the government index for the cost of higher education. This could be a permanent fix. In this way the benefit’s value will stay constant and the Veteran will be able to use the program for the ultimate benefit of the Veteran, his or her family, and the Nation.

## **VEAP**

There are approximately 110,000 active duty career service members who have never been given the chance to enroll in the Montgomery GI Bill program. These men and women, presently in their 17<sup>th</sup> to 25<sup>th</sup> years of service, entered the Service when VEAP was the only education program offered (January 1, 1977- June 30, 1985). Understandably, many were advised not to sign up for this inferior benefit and then in 1985 found that they could not enroll in the new MGIB. While we are urging Congress to improve the MGIB benefits we should not forget these important members serving our Country at this critical time. Recently, HR879 was introduced. It would remedy this situation by allowing these servicemembers a one- time opportunity to sign up or the MGIB. We respectfully suggest that Congress allow such a period of time when these members may enroll in MGIB.

## **National Guard and Reserve MGIB Benefits**

It has become dramatically clear to the Nation how much the active duty depends on our Reserve and National Guard components. Since 9/11 we have seen tens of thousands of

National Guard and Reserve servicemembers called up for crucial rolls. Total Force is certainly more than a slogan. While the Reserve and National Guard duties have grown dramatically in the past several years their benefits have not even kept pace with the active duty benefits. In 1985 when this program was created under Chapter 1606 of 10 United States Code National Guard and Reserve MGIB benefits were set at 47% of the Active Duty benefits. Since that date there have only been two legislative increases (along with cost of living changes). Now the benefit on October 1, 2003 will only be \$276 a month compared to the Active Duty's \$985 a month. That is approximately 28% of the Active Duty benefit. TREA hopes that Congress will synchronize the two programs and fund the benefit fully for these men and women who are willingly answering our Nation's call.

### **Dependency and Indemnification Compensation (DIC) Improvements**

If a DIC beneficiary remarries she loses her DIC benefits during the subsequent marriage. This is true no matter what her age is. In all other U.S. government survivor employee programs a beneficiary retains his or her benefits if he or she marries after a certain age. Normally the cut off age is 55. Only the Military DIC survivor is left out. When considering second marriages people have financial needs and obligations that must be considered. They have obligations to first families and children. They cannot enter a new marriage bringing no income. They cannot come to a new marriage hat in hand. Therefore many DIC widows and widowers lose a chance for happiness due to financial limitations. Representative Michael Bilerakis of this House Committee has tried for years to correct this situation. His HR 36 will allow a DIC beneficiary to retain his or her DIC benefit if he or she remarries after reaching the age of 55. TREA hopes that all of you in the House can support this Bill. We further hope that the VA Senate Committee will support S 249 so that this unfortunate and unfair situation will end. Simple fairness calls for this change.

The DIC recipient also faces his or her own, little noticed, concurrent receipt. For every dollar of DIC received a DIC beneficiary loses a dollar of SBP. If a service member dies on active duty or due to a service-connected disability his or her survivors will receive DIC. If a service connected disabled retiree dies of something unrelated to the disability his or her survivor would receive nothing. This means that a disabled retiree must buy SBP if he or she wants to make sure that their surviving spouse is protected. However, if he or she does in fact die of the Service Connected Cause their survivor gets little or

nothing of the SBP. This is an improper choice to require them to make. Additionally, last year Congress granted SBP for survivors of service members who died on active duty. Surely you meant this to be a real benefit and not a grant given with one hand that will be taken away by the other. TREA hopes that Congress will stop this overlooked but unfair bargain.

### **Concurrent Receipt of Military Retired Pay and VA Disability**

TREA, along with all the other VSO and military organizations, was greatly disappointed that full, unqualified concurrent receipt did not become law at the end of the last session of Congress. We are grateful to Congress for creating a beachhead in the law by eliminating the offset for certain retirees with combat related and operations related disabilities. The Pentagon is presently writing the rules that will govern this special pay provision. We are sure that Congress as well as the VSOs will study the regulations to confirm that the rules and regulations will accomplish what the law intended.

Again and again TREA and many other organizations have argued that Military Retirement Pay is an earned benefit for completing years of service to the Country while VA disability compensation is a statutory right to compensate a service member for his loss of health and function and future earning potential. These are two completely different payments; there is no logical reason to have them offset one another.

While we hope that the special pay for combat and operational caused disabilities is only a first step towards fairness to thousands of disabled Military Retirees we look forward to its full and fair implementation. When writing the Bill during dramatic and pressured last minute negotiations we believe that two groups of disabled retirees were inadvertently left out of the special pay provisions. The statute's language leaves out all National Guard and Reserve retirees with combat related disabilities. TREA is sure that Congress did not intend to ignore these retirees. In the early 1990's a few military retirees received a longevity retirement with 15 to 19 years of service as part of the drawdown plan. They were promised a complete longevity retirement which surely should mean including them in this special pay provision if they meet the other requirements.

TREA and all the VSO's and military organizations were very upset by a proposal last year that would have barred the VA from processing any new disability claims for an applicant who would qualify for payment under any new restored retired pay legislation concurrent. We ask again in this context that Congress assure full funding for claims processing and adjudication.

## **Conclusion**

Mr. Chairmen, while some of the items I have touched upon are not directly under the jurisdictions of your Committees they are all clearly within your areas of interest and expertise. Also many members of both VA Committees have other Committee assignments that directly relate to these issues. Chairman Specter, Chairman Smith, Ranking Member Rockefeller and Ranking Member Evans TREA has great expectations or what the next few years can hold for America's Veterans. The Nation has seen how crucial and dangerous the services and duties they perform are. They have seen the sacrifice the Military makes for the love and safety of this Country. The members of your Committees have never forgotten these truths. We hope that we can move on in this session of Congress to make changes that will improve the lives of all veterans when they come home.

Again, thank you very much for this opportunity. I would be happy to answer any questions you may have.

